

OPERATIONS: 651-643-3473 **PARK PERMITS**: 651-632-5111 **FORESTRY**: 651-632-5129 Facsimile: 651-632-5115

1100 Hamline Avenue North Saint Paul, Minnesota 55108

TTY: 651-266-6378 www.ci.stpaul.mn.us/depts/parks

2008 LILYDALE PARK FOSSIL HUNTING PERMIT

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Date of Reserve	ation:	Time:	AM/PM th	rough _	AM/PM
Phone	Fax:		#Children:	#A	dults:
Please Note: Lily	dale fossil hunting is a s	elf-guided tour a	nd the caves are no	t open to	the public.
	re a date reserved for fos then send your fee and t				
Name:		Organization:_			
Address:		City		State	Zip
that are to \$9.30 and Cancellati	0.00 per group of less than ax exempt, the 7% tax included \$25.00 = \$23.25) with proposes must be made prior to the state of the state	10 people; \$25.00 ided in the permit for of tax exempt state date of permit.	ee will be deducted fratus. No refunds are issued	nan 10 peo om the fe	e listed (\$10.00 =
	23.25) permits, the refund as will be granted if the Park n date.			,	y of the
Fossil hun	ting can only be conducted	during daylight hou	ırs.		
participan entering L 3. The park persons th 4. The park whatever control an acknowled persons o or injuries	(Make check payable to: City of Saint Paul) The park user will take all means necessary to fully advise participants (and their parent or guardians if participants are not adults) of all activities that park user and above group wishes to engage in when entering Lilydale Park for the purposes stated above. The park user at all times warrants that full and adequate adult supervision will be provided for any mino persons the park user brings into Lilydale Park for the above purposes. The park user agrees to indemnify and hold harmless the City of Saint Paul from any and all claims of whatever kind or nature that may arise while the park user and/or persons acting under its auspices and control are on said property pursuant to this permit. As part of said indemnification, the park user fully acknowledges that some of the conditions and locations within the Lilydale Park area are hazardous to persons or property and park user specifically assumes the liability of the City of Saint Paul as such claims or injuries may arise to persons or property due to its unsafe conditions.				
On behalf of the	(Organization Nam	I,	(Applie	cant's Na	me)
certify that I have	read the above conditions a o all participants of the abo	nd fully understand	I them and accept res	ponsibility	for making these
Department of Parl	rmit is not valid until signed ks and Recreation. A valid o the applicant, and payment	copy of this permit	will be sent to the app		
FOR OFFICE USE	ONLY: proved By:				
Apı	City of Saint	Paul - Departm	ent of Parks and	Recreat	ion
Purchase Order #	Cash \$ (Credit Card Type:	Check #_	A	mount \$
	mit Information\Fossil Permit Infor				